



APPLICATION FOR QS/IFQ TRANSFER ELIGIBILITY CERTIFICATE

U.S. Dept. of Commerce/NOAA
National Marine Fisheries Service
Restricted Access Management
P.O. Box 21668
Juneau, AK 99802-1668



THIS IS A **TWO PAGE APPLICATION**. THE FIRST PAGE IS FOR THE APPLICANT'S PERSONAL INFORMATION AND NOTARIZED SIGNATURE. PAGE TWO IS FOR THE APPLICANT'S FISHING HISTORY. PLEASE **MAKE COPIES OF PAGE TWO IF MORE SPACE IS NEEDED** TO DOCUMENT THE APPLICANT'S PARTICIPATION OF AT LEAST 150 DAYS IN ANY U.S. COMMERCIAL FISHERY.

BLOCK A - APPLICANT INFORMATION (TYPE OR PRINT)

1. SSN or Tax ID Number:	2. Date of Birth:	3. IFQ ID Number (NMFS use only):
4. Name (Print Legibly):		
5. Permanent Business Address:	6. Address to which you want TEC Documents sent if other than Permanent Address:	
7. Business Phone:	8. Business Fax:	
9. Are you a U.S. citizen, Us Corporation, Partnership, or Association of Business Entity? Yes [] No []		

BLOCK B - FREEZER SHARES

1. Is this TEC intended for an Entity that wishes to buy or lease Category A Quota Shares only?

Check One: Yes [] No []

If Yes, and you are a corporation, partnership or other non-individual entity please complete a Quota Share Holder: Identification of Ownership Interest form.

BLOCK C - NOTARY CERTIFICATION

Under penalties of perjury, I declare that I have examined this application, and to the best of my knowledge and belief, the information presented here is true, correct and complete.

1. Signature of Applicant (or Authorized Agent):	2. Date:
3. Printed Name of Applicant (or Authorized Agent) Note: If this is completed by an agent, attach authorization:	
4. Notary Public (Signature): Attest	6. Affix Notary Stamp or Seal Here:
5. Commission Expires:	

BLOCK D - COMMERCIAL FISHING EXPERIENCE

1. Species (one per block):	2. Gear Type:	3. Location:
4. Date From:	5. Date To:	
6. Number of days spent harvesting fish:		
7. Duties performed while directly involved in the harvesting of fish. BE SPECIFIC:		
8. Vessel Name:	9. ADF&G or Coast Guard Number:	
10. Vessel Owner:	11. Vessel Operator:	
12. Reference Name (person other than yourself):	13. Reference's relationship to you:	
14. Reference's Business Mailing Address:		
15. Reference's Business Phone Number:		

BLOCK E - COMMERCIAL FISHING EXPERIENCE - CONTINUED

1. Species (one per block):	2. Gear:	3. Location:
4. Date From:	5. Date To:	
6. Number of days spent harvesting fish:		
7. Duties performed while directly involved in the harvesting of fish. BE SPECIFIC:		
8. Vessel Name:	9. ADF&G or Coast Guard Number:	
10. Vessel Owner:	11. Vessel Operator:	
12. Reference Name (person other than yourself):	13. Reference's relationship to you:	
14. Reference's Business Mailing Address:		
15. Reference's Business Phone Number:		



INSTRUCTIONS

Application for QS/IFQ Transfer Eligibility Certificate

Those who wish to receive QS/IFQ by transfer but did not have QS initially awarded to them must submit this application for approval. Only those who have 150 or more days of experience working as part of a harvesting crew in any U.S. commercial fishery are eligible to receive a Transfer Eligibility Certificate, (**TEC**). Work in support of harvesting but not directly related to it is not considered harvesting crew work. For example, experience as an engineer, cook, or preparing a vessel for a fishing trip does not satisfy the requirement.

Type or print legibly in ink; retain a copy of completed application for your records. The completed form should be mailed to: **NMFS Alaska Region, Restricted Access Management, P.O. Box 21668, Juneau, AK 99802-1668**. If you need additional information, contact RAM at 1-800-304-4846 or 907-586-7202. **Please allow at least 10 working days for your application to be processed.** Items will be sent by first class mail, unless you provide alternate instructions **and** include a prepaid mailer with appropriate postage or corporate account number for express delivery.

BLOCK A - APPLICANT INFORMATION

1. Social Security Number or Tax ID Number.
***Privacy Act Statement:** Federal regulations (at 50 CFR Part 679) authorize collection of this information. This information is used to verify the identity of the applicant(s) and to accurately retrieve confidential records related to federal commercial fishery permits. Where the requested information is a Social Security Number (SSN), disclosure is voluntary; in the event it is not provided, NMFS will assign a unique code that will identify the records.*
2. Date of birth.
3. NMFS use only.
4. Full name as it should appear on the certificate.
5. Permanent mailing address should include street and/or PO box, city, state, and zip code.
6. Temporary mailing address, if you would like the TEC documentation sent somewhere other than your permanent address.
- 7-8. Business and Fax numbers should include area code.
9. Are you a U.S. citizen or a US Corporation, Partnership, or Association of business Entity? IF NO, STOP HERE, you are not eligible to receive QS/IFQ by transfer.

BLOCK B - FREEZER SHARES

If you are a person wishing to lease or purchase Freezer Vessel Category Quota Shares ONLY, check "Yes". If you are a corporation, partnership or other non-individual entity you must complete a Quota Share Holder: Identification of Interest form. This form can be obtained by contacting RAM. *Note that you may be required to submit further evidence of eligibility i.e., that you are the type of entity that would have been eligible to document a vessel under U.S. laws in effect in 1988, 1989 and 1990.*

BLOCK C - CERTIFICATION OF APPLICANT AND NOTARY

1. Sign, Print and date the application in the presence of Notary Public. As a result of this requirement, **we cannot process faxed applications.**
2. Representatives acting on behalf of an applicant must submit proof of authorization to submit this application on their behalf.
3. A Notary Public must Attest and affix Notary Stamp. Notary Public cannot be completed by the person submitting this application.

BLOCKS D & E - COMMERCIAL FISHING EXPERIENCE.

Note: complete as many "BLOCK D" and "E" sections as are necessary to establish 150 days of experience as part of a harvesting crew in any U.S. commercial fisheries. (Make Copies of this page)

1. Any targeted Species in a U.S. commercial fishery, **only 1 fishery per block.**
2. Gear type can be any used to legally harvest in a U.S. commercial fishery.
3. Actual regulatory, statistical, or geographic harvesting location.
4. Starting date.
5. Ending date.
6. Total days actually spent doing harvesting work during the claimed period in questions 4 & 5.

7. List or describe your duties as a member of a harvesting crew.
8. Registered name of vessel upon which above duties were performed.
9. Identifying number of the vessel in (9).
10. Name of the individual(s) or corporation(s) whose name is listed on vessel ownership papers.
11. Person (may be yourself) in charge of operating the vessel.
12. Reference (other than yourself) who is able to verify the above experience.
13. Reference's relationship to you.
14. Business mailing address of listed reference.
15. Phone number of listed reference.

PUBLIC REPORTING BURDEN STATEMENT

Public reporting burden for this collection of information is estimated to average [2 hours] per response, including the time for reviewing the instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Assistant Regional Administrator, Sustainable Fisheries Division, NOAA National Marine Fisheries Service, P.O. Box 21668, Juneau, AK 99802.

ADDITIONAL INFORMATION

Before completing this form please note the following: 1) Notwithstanding any other provision of law, no person is required to respond to, nor shall any person be subject to a penalty for failure to comply with, a collection of information subject to the requirements of the Paperwork Reduction Act, unless that collection of information displays a currently valid OMB Control Number; 2) This information is mandatory and is required to manage commercial fishing efforts under 50 CFR part 679 and under section 402(a) of the Magnuson-Stevens Act (16 U.S.C. 1801, et seq.); 3) Responses to this information request are confidential under section 402(b) of the Magnuson-Stevens Act (16 U.S.C. 1801, et seq.). They are also confidential under NOAA Administrative Order 216-100, which sets forth procedures to protect confidentiality of fishery statistics. These procedures have been implemented under the NMFS Operations Manual entitled, "Data Security Handbook for the Northwest-Alaska Region National Marine Fisheries Service."